	1. DATE SUBMITTED 1 March 2000 3 March 2000						
C (implementation deta	ails). If there is no	o specific required change	date, enter 60 days fr	much of Part B as possible. rom date submitted. Address ox (External: NWSRC@noaa.	s questions to NWS		
ORIGINATOR OFFIC PRC	5. ORIGINATOR TRACKING NUMBER P43N_PRC_A100036						
6. SYSTEMS AFFECTED ASOS X A	7. WSH TRACKING NUMBER NWS 556 8 March 2000						
8. TITLE OF CHANGE NCF Software relea	ase 5.0.NCF						
9. TYPE OF CHANGE				10. SITES AFFECTED (Atta	ach Part B, Page 2, if needed)		
HARDWARE	X GOFTWARE	DOCUMENTATION	I ONLY	NCF Only (See attachment	A-1A for details)		
Enhancements to the NOn-line NNM and IT/O is accountability, Config capabilities with Service product. 12. KNOWN OR PROPOUP Upgrade COTS for the instance of	NCF, including: backup, Internal gurable escalation ce Reporter, Sup OSED SOLUTION NCF. (Installation TIONS 15. RATIONALE Availability of	message filtering capability of message severity, Bu ports integration of Inform (Include source and descron instructions are contains FOR REQUIRED CHANGE HP Consultant and this late to the NCF: * HP Service	y, Message browser indles ECS 3.0 for imphix and Remedy Smart ription of new features ned in IT/O 5.3 documed DATE (Include propositer version of IT/O is received by the service of IT/O is re	roved correlation capability, Pug-Ins , and Ensure conti s or data products.) entation.) ed priority, if known.) equired to support other R4.3 Smart Plug-In fo Remedy *	JNIX logon-to-IT/O Supports full reporting nued vendor support of		
		C	CB/PMC/CMB DEC	ISION			
16. DECISION AUTHOR LEVEL	RITY	CCB LEVEL ONI	☐ CCB LEVEL ONLY ☐ PMC or NWS CMB DECISION REQ				
17. CCB LEVEL DECISI	ION	☐ APPROVED ☐ RECOMMEND A ☐ DISAPPROVED		DATE SIGNED			
10 DMC OD NIME CMD		FOR USE ONLY WHE	N PMC or NWS C	MB DECISION REQUIRE	D		
18. PMC OR NWS CMB DECISION	3	☐ APPROVED ☐ DISAPPROVED		DATE SIGNED			

NWS CHANGE FORM PART A - DATA PRODUCTS SUPPLEMENT This information is required for Data Products submissions. (Submitters should complete all applicable blocks, if known. WSH will assist.) Attach extra pages if necessary.									ORIGINATOR TRACKING NUMBER P43N_PRC_A100036 WSH TRACKING NUMBER									
													3. AWIP	S ID	4. AFO	S PIL		5. WMO HEADER
NNN	XXX	CCC	NNN	XXX			REV DEL	Y/N	R PER MSG				DISTR	12. STATE CIRCUITS		13. PRIME UPLINK	14. B/U UPLINK	
N/A																		
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		Г	OR MET	AR CHAN	IGES ONI	V			19. INTE	ERNAL NWS	20. PRODUCT SOURCE			21. AWIPS	S DATA	TYPE	<u></u>	
FOR METAR CHANGES ONLY 15. COMMS 16. N. LATITUDE 17. W. LONGITUDE 18.				USE ONLY		23.11.0200.000.002												
ID		DEG	MIN	SEC	DEG	MIN	SEC	ELEV (M)	22.		A. CHANGE NOTICE	B. EFFE	ECTIVE DA	TE	C. ISS	C. ISSUE DATE		
								(100)	AWIPS									
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1. ORIGINATOR TRACKING NWS CHANGE FORM NUMBER PART B P43N_PRC_A100036 All RC/ECP submissions must also address the following information. Indicate if any areas are 2. WSH TRACKING NUMBER unknown or do not apply. State why information is unknown and when it will be available. Attach extra pages if necessary, referencing each applicable subject. NWS 556 **FUNDING INFORMATION** 3. SOURCE OF 4 TOTAL Estimate costs and indicate known sources of funding. (Include travel time, installation time, **FUNDING** COST administrative time, and software development time when applicable.) 5. DEVELOPMENT COSTS (Estimate development costs) AMOUNT PRC, HP (Cost included in CLIN 018, CLIN 101, and CLIN 103) 6. OPERATIONAL TEST AND EVALUATION COSTS (Estimate test and evaluation costs) AMOUNT 7. PRODUCTION COSTS (Include acquisition, kit proofing, spares, delivery, and documentation **AMOUNT** costs) N/A 8. COMMUNICATIONS SERVICE/CIRCUITS COSTS (Include installation and recurring costs) AMOUNT AMOUNT 9. IMPLEMENTATION SUPPORT COSTS (Include travel, installation, and administrative costs) PRC, HP (Cost included in CLIN 018, CLIN 101, and CLIN 103) 9A. LIFE CYCLE SUPPORT COSTS (Less communications service/circuits) **AMOUNT** NCF SUPPORTING INFORMATION AND SCHEDULES Provide detailed information needed to implement the requested change. 10. DEVELOPMENT STATUS/SCHEDULE (Major milestones such as Start, 11. PRODUCTION STATUS/SCHEDULE (Major milestones such Beta Test, and OT&E) as Solicitation, Contract Start Date, Delivery Date, Kit Proofing, N/A etc.) N/A 12. IMPLEMENTATION/RETROFIT SCHEDULE 13. FACILITY INFORMATION (Attach facility drawings/plans.) N/A IT/O agents will be upgraded at all sites as a background activity over several months 14. COMMUNICATIONS INSTALLED (Type required, who will order, and 15. COMMUNICATIONS SERVICE/CIRCUITS TO BE REMOVED associated hardware required; attach Part B, Page 2, if needed.) N/A N/A 16. REQUIRED CLEARANCES, WAIVERS, AND LICENSES (Include person 17. COORDINATION OF CHANGE WITH OTHER CHANGES or organization responsible for obtaining each) N/A 18. PHYSICAL ITEMS AND DOCUMENTS AFFECTED (Include part, serial, 19. STAFF RESOURCE IMPACTS (Skills and workload impact on and document numbers. Attach Part B, Page 2, if needed.) maintainers, operators, and managers.) N/A N/A 20. LOGISTICS IMPACTS (Include facilities, maintenance, training, and 21. OPERATIONAL IMPACTS (Include continuity and back up support equipment impacts.) needs and plans.) N/A N/A 22. ADDITIONAL MAJOR CHANGE ACTIVITIES (Include who will accomplish each of them and staff hours required.) N/A

	1. ORIGINATOR TRACKING NUMBER P43N_PRC_A100036									
This information is required prior to publication of Engineering Modification Notes and Software Release Notes. List physical items to be replaced and specify any changes in related documentation. (Submitters should complete this information, if known. WSH will assist.)							2. WSH TRACKING NUMBER NWS 556			
3. ITEM NAME, CIRCUIT TYPE, SOFTWARE VERSION, OR SITE	4. REMOVE	5. SUPERSEDED ITEM C	OR CONFIGURATION	6. SUPERSEDING PART NUMBER OR	7. DOC TYPE	8. SUPERSEDED 9. SUPERSEDING DOCUMENT DOCUMENT			à	
	REPLACE MODIFY	A. PART NUMBER	B. SERIAL NUMBER(S) OR	NEW CONFIGURATION		Α.	B.	А.	В.	
NCF documentation	Modify					TBD	TBD	TBD	TBD	

NWS CHANGE FORM PART C	NUMBER	1. ORIGINATOR TRACKING NUMBER P43N_PRC_A100036 2. WSH TRACKING NUMBER NWS 556			
WSH is responsible for Part C, but submitters may complete sections that would help clar change requirement or the necessary implementation actions.					
3. CCB COST EVALUATION					
NWS COST \$ FAA COST \$ DOD COST \$ OTHER AGENCY CO: (SPECIFY)		L COST \$			
4. IMPLEMENTATION DOCUMENTS REQUIRED					
Engineering Modification Note	Other Docume	nt (Specify)			
ADDITIONAL IMPLEMENTATION INSTRUCTIONS (e.g., Implementation schedule, parts shi additional documentation required, and status reporting instructions.) Include documentat step required to verify completion of the implementation activity.					
5. IMPLEMENTATION ACTIVITY REQUIRED	6. REQUIRED COMPLETION DATE	7. RESPONSIBLE PERSON AND OFFICE	8. DOCUMENT OR ACTION REQUIRED TO VERIFY COMPLETION		
A. Coordinate Implementation Schedule with NCF through SST	24 Feb 00	Thigpen/SST, W/APO3	N/A		
B. NCF install the change, perform necessary testing.	28 Feb 00	Thigpen/SST,			
C. Ensure the appropriate WSH management information systems and configuration management data bases are updated to reflect these changes	9 June 00	W/APO3 Michelle deTommaso W/OSO113			